

Health Resource Advocate Program Monitoring Report

Purpose: The Michigan Department of Health and Human Services (MDHHS) will require reporting on the status of the Health Resource Advocate (HRA) Program quarterly for the 2023-2024 school year. The purpose of the quarterly monitoring report is to inform MDHHS of the HRA Program progress, in your area. We also would like to know of any barriers and challenges HRAs are experiencing.

HRA(s) will provide front-line support for COVID-19 testing and reporting, help school districts identify emerging COVID-related health concerns, and strengthen best health practices by providing consultation, prevention services, and appropriate public health strategies for the district. The HRA(s) will help to address the greatest needs in school health: the health and mitigation challenges faced during the COVID-19 pandemic, in addition to other existing and emergent health issues.

| HRA Report | Due Date |
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| Initial workplan | September 15, 2023 |
| Report 1 | November 13, 2023 |
| Report 2 | February 12, 2024 |
| Report 3 | May 15, 2024 |
| Report 4 | August 14, 2024 |

Monitoring reports should be submitted to MDHHS-HRAreporting@michigan.gov.

Reporting: The objectives reported on should be SMART goals: Specific, Measurable, Achievable, Realistic and Time-Bound.

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| Initial Work Plan _____ Date: _____ Quarterly Report Number _____ Date: _____ | |
| Awardee name (LHD, ISD, or local district name): | |
| Point of contact information (name, email, #): | |
| Total number of HRAs allocated: | |
| Total number of HRAs hired as of this date (if you have not hired any HRAs yet, please report the progress of your hiring process) or existing positions carrying out HRA duties: <ul style="list-style-type: none"> • Number of clinical positions • Number of non-clinical positions • Number of existing positions carrying out HRA duties • Describe if FTEs have been divided among multiple positions. | |
| Please indicate how you have allocated HRAs among multiple school districts and how you made the decision: | |
| Please indicate if any changes have occurred to your anticipated budget expenditure and categories. | |
| Please describe your active testing plan. (Include option # in description) *Upon outbreak status or symptomatic testing- testing plans must be activated. <ul style="list-style-type: none"> • Active plan 1 option: Serial testing, post exposure, symptomatic testing, reported positive Covid-19 cases etc. based on outbreak status. • Active plan 2 option: school break testing (pre/post-holiday and events) For entities without a Physicians Order/NPI number vendor support testing must be included. *Testing by choice does not qualify as an active testing. *Serial testing should be used in case of an outbreak or 2 reported positive cases. | |

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| Total number of antigen tests conducted for the quarter <ul style="list-style-type: none"> • Total number of positive tests • Total number of negative tests | |
| Total number of at-home test kits sent out by the school and local school district (if applicable) | |
| Of the total number of tests reported above, how many were reported to Michigan Antigen Testing Results? | |
| How did you notify tests results to students and parents? | |
| Number of outbreaks and case count for each outbreak during the quarter (if applicable) | |
| Other prevention services: (COVID-19 vaccines, vaccine clinics, nutrition, CD plan) | |

| Activity | Progress Update |
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| Implement a COVID-19 testing plan in K-12 settings: <ul style="list-style-type: none"> • Collaboration with local health agencies, medical treatment facilities, local emergency personnel and agencies, and MDHHS • Coordinating testing events • Other | |
| Activity | Progress Update |
| COVID-19 Prevention Services: <ul style="list-style-type: none"> • Screenings • Contact tracing • Train on best prevention practices • Identification of students' whole child health care needs and how they may be impacted by COVID-19 | |

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| <ul style="list-style-type: none"> Assist districts with identifying emerging COVID-19 related health concerns Other | |
| Outreach activities to students and parents: <ul style="list-style-type: none"> Recommended COVID-19 mitigation strategies - e.g., masking, cleaning/disinfecting, maintaining safe environments through social distancing, etc. Offer guidance, information, and support to students at-risk for COVID-19 as well as their parents. Coordination and collaboration with student and parent groups Other | |
| COVID-19 Best Practices: <ul style="list-style-type: none"> Assist with COVID-19 best practices and protocols Keep abreast current emerging COVID-19 guidance national, state, and local Determine a set of health strategies appropriate for the local school district Assist with the management of the schools' health system database, if applicable Create communication to school and community concerning health and welfare-issues Other | |
| Coordination and partnerships: <ul style="list-style-type: none"> Local health agencies Community and school organizations Other | |
| Activity | Progress Update |
| Prevention Services: <ul style="list-style-type: none"> Symptom screenings and follow-up Confer with students and parents on student health Provision of clinical services as credentials permit and/or make appropriate referrals Other | |

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| Barriers: <ul style="list-style-type: none">• What barriers have the HRAs encountered, this period?• If any, how have the HRAs overcome these barriers? | |
| Improvements: <ul style="list-style-type: none">• What improvements will the HRAs implement for the next reporting period? | |
| HRA Education and Training: <ul style="list-style-type: none">• List all trainings and/or education completed by HRA Staff. | |